

## 2013 - 2017 Capital Budget Request Form

Department	300	Contact Name	Cynthia Lear						
Department	Sanitation	Contact Number	658-3820						
Date	5/23/2013	<a href="mailto:cslear@nola.gov">cslear@nola.gov</a>							
Request #	Department Ranking	Priority Criteria Ranking	Project Name	Project Amount	2014	2015	2016	2017	2018
1	1	135	monitoring and maintenance	\$ 900,000.00	\$180,000.00	\$180,000.00	\$180,000.00	\$180,000.00	\$205,000.00
2	4	111	Sanitation Warehouse	\$ 1,336,654.00	\$1,336,654.00				
4	5	123	Materials Recovery Facility "MRF"	\$ 1,380,000.00		\$1,380,000.00			
3	2	150	Curbside Recycling Carts	\$ 1,025,000.00	\$205,000.00	\$ 205,000.00	\$205,000.00	\$205,000.00	\$205,000.00
5	3	147	Public Litter Can Purchase	\$375,000.00	\$75,000.00	\$75,000.00	\$75,000.00	\$75,000.00	\$75,000.00
6	0	0	0	\$ -					
7	0	0	0	\$ -					
8	0	0	0	\$ -					
9	0	0	0	\$ -					
10	0	0	0	\$ -					
<b>TOTAL</b>				\$ 5,016,654.00	\$1,796,654.00	\$1,840,000.00	\$460,000.00	\$460,000.00	\$485,000.00

Department Head Signature

Printed Name

Cynthia M. Sylvain-Lear

Date 5/23/2013

Capital Budget Request Form			
Agency Number	300	Department Name	Sanitation
Project Name	Recovery 1 Landfill (Testing, Monitoring and M	Department Priority Ranking	1
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Project Address	17000 Chef Menteur Hwy, New Orleans, LA	Council District	E
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	As required by the LA Department of Environmental Quality, the following costs are anticipated annually at this site: Semi-Annual Ground Watering Monitoring, Assessment Monitoring, Soil replacement		
Five Year Summary	As required by the LA Department of Environmental Quality, the site requires monitoring and maintenance. It is in post-closure status.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$900,000	Proposed Funding Source	MCF
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	Sustainable community that adequately maintains properties and follows regulatory requirements.		
What Benefit(s) will be provided to Public from this project?	Environmental considerations		2014, 2015, 2016, 2017, 2018
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number		Department Name	Sanitation
Project Name	Recovery 1 Landfill (Testing, Monitoring and Maintenance)	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	3	9	
External Requirements	4	12	
Protection of Capital Stock	4	12	
Economic Development	4	12	
Operating Budget	3	9	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	1	3	
Relation to dopted Plans	2	6	
Intensity of Use	2	6	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	3	9	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumptom	2	6	
Timeliness/ External	1	3	
Public Support	4	12	
TOTAL Ranking	45	135	

Capital Budget Request Form			
Agency Number	300	Department Name	Sanitation
Project Name	Sanitation Warehouse	Department Priority Ranking	4
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	No
Project Address	2829 Elysian Fields Avenue, N. O., LA 70122	Council District	A
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Construct a warehouse to replace the building demolished after Hurricane Katrina. The building is needed to store equipment and supplies and to include offices for field Supervisors. Productivity would be improved if a warehouse were returned to the site. Currently, supplies are stored in a trailer or various areas within the transfer station. Safety meetings are held off-site or in very cramped quarters within the trailer. The trailer cannot be secured and various items have been reported as stolen.		
Five Year Summary	This department is responsible for sanitation related to the entire City. Productivity would be improved if a warehouse were returned to the site.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$1,336,654	Proposed Funding Source	Bonds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	The staff proposed future land use map request for Planning District 7, PD7-71, shows the adopted future land use as: Neighborhood Commercial and the Staff proposed future land use as: Industrial		
What Benefit(s) will be provided to Public from this project?	the public will benefit from an improved Depar	For what year are you requesting the Project? 2013,2014,2015,2016, or 2017	2013
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number	Blank	Department Name	Sanitation
Project Name	Sanitation Warehouse	Department Priority Ranking	3
Categories	Rating	Score	
Public Health and Safety	2	6	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	3	9	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	4	12	
Relation to dopted Plans	2	6	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	2	6	
Potential for Duplication	3	9	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumptom	2	6	
Timeliness/ External	1	3	
Public Support	1	3	
<b>TOTAL Ranking</b>	<b>37</b>	<b>111</b>	

Capital Budget Request Form			
Agency Number	300	Department Name	Sanitation
Project Name	Curbside Recycling Carts	Department Priority Ranking	2
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	No
Project Address	2829 Elysian Fields Avenue		D
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	The City started a curbside recycling program in 2011. The initial purchase of +42K carts have been delivered based on requests for new carts received on a daily basis.		
Five Year Summary	Based on the number of requests received, it is anticipated that approximately 5K carts will be needed annually.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$1,025,000	Proposed Funding Source	MCF
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project is key to the development of a sustainable community		
What Benefit(s) will be provided to Public from this project?	Environmental considerations	For what year are you requesting the Project? 2013,2014,2015,2016, or 2017	2013
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number		Department Name	Sanitation
Project Name	Curbside Recycling Carts	Department Priority Ranking	2
Categories	Rating	Score	
Public Health and Safety	2	6	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	4	12	
Operating Budget	4	12	
Life Expectancy of Project	3	9	
Percent of Population Served by Project:	3	9	
Relation to dopted Plans	4	12	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	4	12	
Potential for Duplication	3	9	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumptom	3	9	
Timeliness/ External	4	12	
Public Support	4	12	
<b>TOTAL Ranking</b>	<b>50</b>	<b>150</b>	

Capital Budget Request Form			
Agency Number	300	Department Name	Sanitation
Project Name	Materials Recovery Facility "MRF"	Department Priority Ranking	5
Project Type	New Construction	Is a Land acquisition needed? (Y/N)	No
Project Address	17000 Chef Menteur Highway	Council District	E
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	The City of New Orleans should construct its own MRF so that it can generate revenues from the sale of recyclable materials it collects and reduce the volume of materials sent to the landfills which would reduce Operating costs		
Five Year Summary	This project would be in line with the City's plan for a sustainable community		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	Yes	If yes please provide estimate of increase in operating costs.	The expenses would be offset by revenues from the sale of recyclable materials
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$1,380,000	Proposed Funding Source	Bonds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project would be in line with the City's plan for a sustainable community		
What Benefit(s) will be provided to Public from this project?	The public would benefit: from having access to a recycling facility and an improved environment	For what year are you requesting the Project? 2013,2014,2015,2016, or 2017	2013
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	Blank	Department Name	Sanitation
Project Name	Materials Recovery Facility "MRF"	4	4
Categories	Rating	Score	
Public Health and Safety	2	6	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	4	12	
Operating Budget	4	12	
Life Expectancy of Project	4	12	
Percent of Population Served by Project:	4	12	
Relation to adopted Plans	2	6	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	4	12	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Energy Consumption	2	6	
Timeliness/ External	1	3	
Public Support	1	3	
TOTAL Ranking	41	123	

Capital Budget Request Form			
Agency Number	300	Department Name	Sanitation
Project Name	Public Litter Cans	Department Priority Ranking	3
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	
Project Address	2829 Elysian Fields Avenue	Council District	D
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	The City needs additional public litter cans to assist in the reduction in litter on the City's public ROWs		
Five Year Summary	Every year, a percentage of our public litter cans are damaged beyond repair and/or stolen. In addition, as new developments are completed, the additional foot traffic requires the addition of public litter cans.		
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$375,000	Proposed Funding Source	Bonds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	This project will improve the quality of life of the City.		
What Benefit(s) will be provided to Public from this project?	Cleaner streets	For what year are you requesting the Project? 2013,2014,2015,2016, or 2017	2014, 2015, 2016, 2017, 2018
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Capital Budget Request Priority Rating Form			
Agency Number	Blank	Department Name	Sanitation
Project Name	Public Litter Cans	Department Priority Ranking	3
Categories	Rating	Score	
Public Health and Safety	4	12	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	4	12	
Operating Budget	4	12	
Life Expectancy of Project	1	3	
Percent of Population Served by Project:	4	12	
Relation to dopted Plans	4	12	
Intensity of Use	4	12	
Scheduling	4	12	
Benefit/ Cost	4	12	
Potential for Duplication	3	9	
Availability of Financing	2	6	
Special Need	1	3	
Entergy Consumptom	3	9	
Timeliness/ External	1	3	
Public Support	4	12	
<b>TOTAL Ranking</b>	<b>49</b>	<b>147</b>	